

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000118867

**Entity Name:** TOURBILLON TRUST, LLC

**FILED**  
**Oct 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2018 FOUR MILE COVE PKWY  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

2018 FOUR MILE COVE PKWY  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 27-1514631

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PUGLISI, PAUL  
2018 FOUR MILE COVE PKWY  
CAPE CORAL, FL 33990 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** PAUL PUGLISI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** PUGLISI, PAUL  
**Address:** 2018 FOUR MILE COVE PKWY  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** MGRM  
**Name:** CURR, RONALD J  
**Address:** 4935 SW 8TH CT  
**City-St-Zip:** CAPE CORAL, FL 33914

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** PAUL PUGLISI

MGRM

10/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date